

**BEST AVAILABLE COPY**

POSITION	INITIALS	ID NO.	
FEE DETERMINATION	mc		12/17
O.I.P.E. CLASSIFIER		20	12/23
FORMALITY REVIEW	28	71480	1-12-99

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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150	12/23

If more than 150 claims or 10 actions  
 staple additional sheet here

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